

1 **REMARKS**

2 Claims 1, 5, 9, 13, 17 and 21 are pending.

3
4 **Rejections under 35. U.S.C. §103(a)**

5 Independent Claims 1, 9 and 17 stand rejected under 35 U.S.C. §103(a) as
6 being unpatentable over U.S. Patent No. 5,986,568 issued to *Suzuki et al.*, in view
7 of U.S. Patent No. 5,995,101 issued to *Clark et al.*

8 Dependent Claims 5, 13 and 21 stand rejected under 35 U.S.C. §103(a) as
9 being unpatentable over *Suzuki et al.*, in view of *Clark et al.*, and in further view of
10 U.S. Patent No. 5,740,035 issued to *Cohen et al.*

11 Applicants respectfully traverse these rejections for at least the following
12 noted reasons.

13 To establish a *prima facie* case of obviousness, three basic criteria must be
14 met. First, there must be some suggestion or motivation, either in the references
15 themselves or in the knowledge generally available to one of ordinary skill in the
16 art, to modify the reference or to combine reference teachings. Second, there must
17 be a reasonable expectation of success. Finally, the prior art reference (or
18 references when combined) must teach or suggest all the claim limitations.

19
20 **Regarding the Cited References:**

21 *Suzuki et al.* disclose techniques for transferring patient medical
22 information from a server to a remote device (e.g., a PDA) used by a nurse visiting
23 patients. *Suzuki et al.* teach that the nurse can be presented with a graphical
24 interface through which he/she selects a particular patient's name from a drop
25 down list. This input causes a password prompt to be displayed. The nurse then

1 enters his/her password and if the password is verified the nurse is permitted to
2 access applicable patient information previously transferred from the server to the
3 PDA.

4 Note, for example, that the user password in *Suzuki et al.* is associated with
5 the nurse and not the patient (column 16, line 25). Also, *Suzuki et al.* do not
6 disclose or suggest the use of non-modal mechanisms for automatically displaying
7 reminder information during a login process upon determining that there has been
8 a failure to receive user password input from the nurse. Indeed, *Suzuki et al.* do
9 not teach any type of helping mechanism even for failed password inputs, let alone
10 other types of failures to receive requisite or any inputs. Instead, *Suzuki et al.*
11 simply imply that access to the patient information is password protected.

12 *Clark et al.* disclose a multiple level tip-tool for use in a graphical user
13 interface. Here, when a user moves a mouse pointer over an icon and leaves the
14 pointer over the icon for a period of time a first level tip-tool is displayed. If the
15 pointer continues to remain in place over the icon then sometime later the first tip-
16 tool is replaced with a more detailed second tip-tool. Later, the second tip-tool is
17 replaced with an even more detailed third tip-tool.

18 Note, for example, that *Clark et al.* require mouse pointer position input
19 determination to activate their tip-tools. They do not specifically teach or suggest
20 how these multiple level tip-tools may be used to support user login, and therefore
21 they fail to disclose or suggest determining if there has been a failure to receive
22 user password information during a login operation. *Clark et al.* therefore fail to
23 disclose or suggest automatically displaying non-modal mechanisms for user input
24 fields when it is determined that there has been a failure to receive user password
25 information during a login operation. Instead, *Clark et al.* simply present timer-

1 controlled tip-tools that are activated based on a mouse pointer position not
2 changing.

3 *Cohen et al.* disclose a survey device that presents the user with a password
4 entry display. If the user enters the wrong password, then the password entry
5 process ends and a branch process begins that causes a "HELP" display to replace
6 the password entry display. The HELP display simply informs the user to contact
7 the survey organization by telephone for assistance. The branch display does not
8 then allow the survey device to continue with the operation.

9 Note, for example, that *Cohen et al.* do not teach or suggest providing
10 password reminder information through a non-model mechanism, but rather they
11 teach that the operation of the survey device completely branches off upon input of
12 the wrong password, requiring human intervention in the form of a telephone call
13 to someone with the survey provider. *Cohen et al.* are also limited to only
14 determining if a password is right or wrong. Thus, *Cohen et al.* do not therefore
15 also recognize or determine when there other types of failures to receive user
16 password input.

17 18 **Regarding Claims 1 and 5**

19 Independent **Claim 1** recites a method that includes displaying at least one
20 user identifier prompt within a graphical user interface, the at least one user
21 identifier prompt including at least one selectable user area operatively associated
22 with a previously configured user capable of completing a login operation by
23 inputting user password input. Upon receiving user input selecting the at least one
24 selectable user area, the method includes displaying at least one user input field
25 within the graphical user interface, wherein the at least one user input field is

1 automatically configured to operatively receive user password input associated
2 with the login operation. While conditions allow for the reception of the user
3 password input and it is determined that there has been a failure to operatively
4 receive the user password input for the login operation, the method further
5 includes automatically displaying reminder information associated with the user
6 input field through a non-modal mechanism within the graphical user interface.

7 This method is very different than the cited art. As mentioned above, the
8 user password in *Suzuki et al.* is associated with the nurse and not the patient. In
9 Claim 1, the user identifier prompt is related to the user password input. *Suzuki et*
10 *al.* do not use non-modal mechanisms, as recited in Claim 1, for automatically
11 displaying reminder information during a login process upon determining that
12 there has been a failure to receive user password input from the nurse. In Claim 1,
13 the Indeed, *Suzuki et al.* do not teach any type of helping mechanism even for
14 failed password inputs, let alone other types of failures to receive requisite or any
15 inputs. Instead, *Suzuki et al.* simply imply that access to the patient information is
16 password protected. While *Clark et al.* require mouse pointer position input
17 determination to activate their tip-tools, they do not specifically teach or suggest
18 how these multiple level tip-tools may be used to support user login, and fail to
19 teach determining if there has been a failure to receive user password information
20 during a login operation. *Clark et al.* also fail to disclose or suggest automatically
21 displaying non-modal mechanisms for user input fields when it is determined that
22 there has been a failure to receive user password information during a login
23 operation. Instead, *Clark et al.* simply present timer-controlled tip-tools that are
24 activated based on a mouse pointer position not changing. *Cohen et al.* fail to
25 teach providing password reminder information through a non-model mechanism.

1 Instead, they teach that the operation of the survey device completely branches off
2 upon input of the wrong password, requiring human intervention in the form of a
3 telephone call to someone with the survey provider. *Cohen et al.* are also limited to
4 only determining if a password is right or wrong, and therefore do not recognize or
5 determine when there other types of failures to receive user password input.

6 The Office Action has failed to establish a *prima facie* case of obviousness.

7 First, there is no suggestion or motivation, either in the references themselves or in
8 the knowledge generally available to one of ordinary skill in the art, to modify the
9 reference or to combine reference teachings to provide the method as recited in
10 Claim 1. Secondly, there is no reasonable expectation of success in combining the
11 cited references to somehow end up with the method as recited in Claim 1.
12 Finally, the references when combined clearly fail to teach or suggest all the
13 limitations in Claim 1.

14 Thus, Claim 1 is patentable over *Suzuki et al.*, *Clark et al.* and/or *Cohen et*
15 *al.*, alone or in combination.

16 Consequently, with Claim 1 being so clearly patentable over the cited art
17 and in condition for prompt allowance, so too is Claim 5 which depends there
18 from and recites further limitations.

19
20 **Regarding Claims 9 and 13**

21 Independent Claim 9 is drawn to a computer-readable medium having
22 computer-executable instructions for causing at least one processing unit to
23 support a login operation by performing steps that include displaying at least one
24 user identifier prompt within a graphical user interface, the at least one user
25 identifier prompt including at least one selectable user area operatively associated

1 with a previously configured user capable of completing a login operation by
2 inputting user password input, and upon receiving user input selecting the at least
3 one selectable user area, displaying at least one user input field on the display
4 within the graphical user interface, wherein the at least one user input field is
5 automatically configured to operatively receive user password input associated
6 with the login operation. Additional steps include determining if there has been a
7 failure to operatively receive the user password input for the login operation while
8 conditions allow for the reception of the user input, and automatically displaying
9 reminder information associated with the user input field through a non-modal
10 mechanism within the graphical user interface based on the failure to operatively
11 receive the user password input.

12 These recited steps are is very different than that which is taught in the cited
13 art. Again, the user password in *Suzuki et al.* is associated with the nurse and not
14 the patient (different users, unlike Claim 9) and *Suzuki et al.* clearly fail to use
15 non-modal mechanisms as in Claim 9 for automatically displaying reminder
16 information during a login process upon determining that there has been a failure
17 to receive user password input from the nurse. *Suzuki et al.* do not teach any type
18 of helping mechanism even for failed password inputs, let alone other types of
19 failures to receive requisite or any inputs. *Clark et al.* require mouse pointer
20 position input determination to activate their tip-tools, they do not specifically
21 teach or suggest how these multiple level tip-tools may be used to support user
22 login, and fail to teach determining if there has been a failure to receive user
23 password information during a login operation. *Clark et al.* also fail to disclose or
24 suggest automatically displaying non-modal mechanisms for user input fields
25 when it is determined that there has been a failure to receive user password

1 information during a login operation. Instead, *Clark et al.* simply present timer-
2 controlled tip-tools that are activated based on a mouse pointer position not
3 changing. *Cohen et al.* fail to teach providing password reminder information
4 through a non-model mechanism. Instead, they teach that the operation of the
5 survey device completely braches off upon input of the wrong password, requiring
6 human intervention in the form of a telephone call to someone with the survey
7 provider. *Cohen et al.* are also limited to only determining if a password is right or
8 wrong, and therefore do not recognize or determine when there other types of
9 failures to receive user password input.

10 Once again, the Office Action has failed to establish a *prima facie* case of
11 obviousness. First, there is no suggestion or motivation, either in the references
12 themselves or in the knowledge generally available to one of ordinary skill in the
13 art, to modify the reference or to combine reference teachings to provide the
14 computer-readable medium as recited in Claim 9. Secondly, there is no reasonable
15 expectation of success in combining the cited references to somehow end up with
16 all of the steps as recited in Claim 9. Finally, the references when combined
17 clearly fail to teach or suggest all the limitations in Claim 9.

18 Thus, Claim 9 is patentable over *Suzuki et al.*, *Clark et al.* and/or *Cohen et*
19 *al.*, alone or in combination.

20 Consequently, with Claim 9 being so clearly patentable over the cited art
21 and in condition for prompt allowance, so too is Claim 13 which depends there
22 from and recites further limitations.

23
24 **Regarding Claims 17 and 21**
25

1 In Claim 17 an arrangement is recited that includes a display device, a user
2 input device, a processor and memory. The processor is configured to display at
3 least one user identifier prompt within a graphical user interface on the display
4 device, the at least one user identifier prompt including at least one selectable user
5 area operatively associated with a previously configured user capable of
6 completing a login operation by inputting user password input, and receive user
7 input selecting the at least one selectable user area, and in response display at least
8 one user input field within the graphical user interface, wherein the at least one
9 user input field is automatically configured to operatively receive user password
10 input associated with the login operation. The processor is also configured to
11 determine if there has been a failure to operatively receive the user password input
12 for the login operation while conditions allow for the reception of the user input,
13 and automatically display reminder information associated with the user input field
14 through a non-modal mechanism within the graphical user interface based on the
15 failure to operatively receive the user password input.

16 This arrangement is also very different than that which is taught in the cited
17 art. As mentioned above, the user password in *Suzuki et al.* is associated with the
18 nurse and not the patient (different users, unlike Claim 17) and *Suzuki et al.* clearly
19 fail to use non-modal mechanisms as in Claim 17 for automatically displaying
20 reminder information during a login process upon determining that there has been
21 a failure to receive user password input from the nurse. *Suzuki et al.* do not teach
22 any type of helping mechanism even for failed password inputs, let alone other
23 types of failures to receive requisite or any inputs. *Clark et al.* require mouse
24 pointer position input determination to activate their tip-tools, they do not
25 specifically teach or suggest how these multiple level tip-tools may be used to

1 support user login, and fail to teach determining if there has been a failure to
2 receive user password information during a login operation. *Clark et al.* also fail
3 to disclose or suggest automatically displaying non-modal mechanisms for user
4 input fields when it is determined that there has been a failure to receive user
5 password information during a login operation. Instead, *Clark et al.* simply
6 present timer-controlled tip-tools that are activated based on a mouse pointer
7 position not changing. *Cohen et al.* fail to teach providing password reminder
8 information through a non-model mechanism. Instead, they teach that the
9 operation of the survey device completely branches off upon input of the wrong
10 password, requiring human intervention in the form of a telephone call to someone
11 with the survey provider. *Cohen et al.* are also limited to only determining if a
12 password is right or wrong, and therefore do not recognize or determine when
13 there other types of failures to receive user password input.

14 The Office Action has again failed to establish a *prima facie* case of
15 obviousness. First, there is no suggestion or motivation, either in the references
16 themselves or in the knowledge generally available to one of ordinary skill in the
17 art, to modify the reference or to combine reference teachings to provide the
18 arrangement as recited in Claim 17. Secondly, there is no reasonable expectation
19 of success in combining the cited references to somehow end up with the
20 arrangement as recited in Claim 17. Finally, the references when combined clearly
21 fail to teach or suggest all the limitations in Claim 17.

22 Thus, Claim 17 is patentable over *Suzuki et al.*, *Clark et al.* and/or *Cohen et*
23 *al.*, alone or in combination.

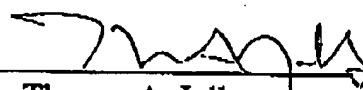
1 Consequently, with Claim 17 being so clearly patentable over the cited art
2 and in condition for prompt allowance, so too is **Claim 21** which depends there
3 from and recites further limitations.

4
5 **Conclusion**

6 The pending claims are in condition for allowance and clearly patentable
7 over the cited art.

8
9 Respectfully Submitted,

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